## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

9371.003

	OLAMAC AC EU ED DADE.											
	CLAIMS AS FILED - PART (Column 1)				l. (Column 2)			SMALL ENTITY TYPE			OTHER THAN	
	TOTAL CLAIMS		142	42				RATI	E FE		RATE	
	FOR		NUMB	NUMBER FILED		NUMBER EXTRA		BASIC	EE 385.	00 01		
	TOTAL CHARGEABLE CLAIMS		42 1	42 minus 20=		. 22		X\$ 9:	= 18	$\neg$	1	
INDEPENDENT CLAIMS			3 minus 3 =					X43=			Y00	
1	MULTIPLE DEP	ENDENT CLAIM	PRESENT	RESENT						OF	1	
	If the differen	ce in column 1 is	s less than	ess than zero, enter		"0" in column 2		+145=		OF		
		CLAIMS AS AMENDED - PAF						TOTAI	58	3 OF		
_		(Column 1)		(Colum		(Column 3)	)	SMAL	L ENTITY	OR		R THAN ENTITY
AMENDMENT A	¥ N.	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI TIONA FEE		RATE	ADDI- TIONAL FEE
NC N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
MA	Independent	ENTATION OF M	Minus		0	=		X43=		OR	X86=	3
_	11110171120	ENTATION OF M	OLTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
								TOTAL			TOTAL	
_		(Column 1)		(Columi	n 2)	(Column 3)	AL	ODIT. FEE	: <b></b>		ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE
2 N N	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> -</u>	Minus	•••		= ,	<b> </b>	X43= .	·	OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEI	PENDENT C	LAIM		-	145=		OR	+290=	
							<u>_</u>	TOTAL	· ·	OR .	TOTAL	•
		(Column 1)		(Column	. 21 /	Column 3)	ADI	OIT. FEE	<u> </u>		DDIT. FEE	
SIL	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FOI	T R SLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
INDMEN	Total	*	Minus	**		=	T <sub>x</sub>	\$ 9=	PEE		X\$18=	FEE
	Independent		Minus	***	1	=	-			OR		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				AIM		<b> </b> _	43=		OR -	X86=	
If the entry in column 1 is less than the entry in column 2 write "0" in column 3										+290=		
	f the "Highest Nurr If the "Highest Nurr	nber Previously Paid ober Previously Paid	l For IN THIS I For IN THIS	SPACE is les	s than 2	20, enter "20."	ADD	TOTAL T. FEE			TOTAL DIT. FEE	
		per Previously Paid	· > ( iotal or	ii wependem) (	is the U	Auczi unwoer to	ii bauv	i the appi	ropriate box	in colun	าก 1.	